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**TRANSMITTAL FORM** 

(to be used for all correspondence after initial filing)

Alexandria, VA 22313-1450 on the date shown below.

Carol Diez

Typed or printed name

Signature

Total Number of Pages in This Submission

Application Number	10/053,826
Filing Date	January 18, 2002
First Named Inventor	Jach H. Chang
Art Unit	2142
Examiner Name	Thong H. Vu
Attorney Docket Number	CCI-005

ENCLOSURES (check all that apply)									
Fee Transmittal Form		Drawing(s)	After Allowance Communication to Group						
Fee Attached		Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences						
Amendment / Reply		Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final		Petition to Convert to a Provisional Application	Proprietary Information						
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter						
Extension of Time Request		Terminal Disclaimer	Other Enclosure(s) (please identify below):						
Express Abandonment Request		Request for Refund  CD, Number of CD(s)	Request for Withdrawl as Attorney or Agent and Change of Correspondence Address with attachment of additional						
☐ Information Disclosure Statement			attorneys withdrawing						
Certified Copy of Priority Document(s)		Remarks							
Response to Miss Incomplete Applic									
Response to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm or Individual name	David B. Ritchie, 31,562								
Signature	N								
Date	10-7-2004								
CERTIFICATE OF TRANSMISSION/MAILING									

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PTO/SB/83 (09-03)

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/053,826
Filing Date	January 18, 2002
First Named Inventor	Jack H. Chang
Art Unit	2142
Examiner Name	Thong Vu
Attorney Docket Number	CCI-005

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450									
Please v	Please withdraw me as attorney or agent for the above identified patent application, and								
☐ all t	all the attorneys/agents of record.								
☑ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
☐ all the attorneys/agents associated with Customer Number									
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reasons for this request are: Client instructions to consolidate their patent prosecution to other firm.									
CORRESPONDENCE ADDRESS									
1.   The correspondence address is NOT affected by this withdrawal.									
2.   Change the correspondence address and direct all future correspondence to:									
Custom	Customer Number								
OR									
Firm or Individu	al Name	Wilfred Lam							
Address		Innovations Management Sciences							
Address	Address 970 Terra Bella Avenue, Suite 8						_		
City		Mountain View	State	CA Zip 94043		94043			
Country	ountry USA								
Telephone		(650) 969-8300	Fax	(650) 969-8203					
Name	David B. Ritch	ie							
Signature	N		Registr	Registration No. 31,562					
Date	October 7, 20	004	Telepho	elephone No. (408) 292-5800		•			
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal									

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Docket No.: CCI-005 (032727-000006)

## Attachment to Request for Withdrawl as Attorney or Agent

## Additional Attorneys Withdrawing:

John P. Schaub, Registration No. 42,125 Kenneth D'Alessandro, Registration No. 29,144 Steven A. Swernofsky, Registration No. 33,040 Jonathan H. Schafer, Registration No. 36,915 Steven J. Robbins, Registration No. 40,299 Stephen R. Uriarte 40,854